

APPLICATION FOR LIMOUSINE LICENSE

Name of Company				Phone Number			
Address							
Name of Owner/Applicant Address							
YR/MAKE	VEHICLE NUMBER	REG NUMBER	SEATING CAPACITY	# OF DOORS	APPROVED BY	CITY TAG#	INSURANCE EXPIRATION
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Chapter 829 of	prior experience, please f the Codified Ordinances of the ewable April 30th of each year	e City of Battle Creek: Lime	ousine Services				
	to issuance of license, proof of accident – Property Damage of (Lia		d Property Damage	- CSL (Combi	ined Single Limit).	•	– Bodily Injury
Signature of Applicant:				Date:			
POLICEDE	PARTMENT: Approved:		Disappro	ved•		Bv:	